



PaySimple Credit Card Rate Analysis Form

Please review the enclosed credit card statements and provide me with a break-down of how much I am paying for each credit card transaction.

I understand that there will be no cost for this service, and that I am under no obligation to open a PaySimple account or to purchase any services from PaySimple.

First Name _____ Last Name _____

Company _____

Phone _____ Fax _____

Email _____ Website _____

Please return this form, along with your most recent statements, by fax to: **303-374-5378**. We'll attempt to contact you within 24 hours with an analysis.